PTO/SB/17 (10-01)
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

(\$) 604

TOTAL AMOUNT OF PAYMENT

Complete if Known **Application Number** 09/551,809 Filing Date April 18, 2000 First Named Inventor FURUIKE et al. **Examiner Name** LY, ANH Group/Art Unit 2172 Attorney Docket No. 01-31

| METHOD OF PAYMENT (check one) | FEE CALCULATION (continued) | | | | | |
|---|-----------------------------|-------------|-------------|-------------|--|-----------------|
| The Commissioner is hereby authorized to charge indicated | 3. A | DDIT | ONAL | FEES | | |
| fees and credit any overpayments to: | Large I | Entity | Small E | Intity | Fee Description | Fee Paid |
| Deposit | Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| Account Number 50-1147 | 105 | 130 | 205 | (\$) 65 | Surcharge – late filing fee or oath | 1 ! |
| Number | 127 | 50 | 227 | 25 | Surcharge – late filing fee or oath Surcharge – late provisional filing fee or | |
| | | | | | cover sheet. |]] |
| Deposit Account Name | 139 | 130 | 139 | 130 | Non-English specification | |
| Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 | 147 | 2,520 | 147 | 2,520 | For filing a request for reexamination | |
| 2. X Payment Enclosed: | 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| Check Money Order Other | 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| FEE CALCULATION | 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 1. BASIC FILING FEE | 116 | 400 | 216 | 200 | Extension for reply within second month | 400 |
| Large Entity Small Entity | 117 | 920 | 217 | 460 | Extension for reply within third month | |
| Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid | 118 | 1440 | 218 | 720 | Extension for reply within fourth month | |
| 101 740 201 370 Utility filing fee | 128 | 1960 | 228 | 980 | Extension for reply within fifth month | |
| 106 330 206 165 Design filing fee | 119 | 320 | 219 | 160 | Notice of Appeal | |
| 107 510 207 255 Plant filing fee | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 108 740 208 370 Reissue filing fee | 121 | 280 | 221 | 140 | Request for oral hearing | |
| 114 160 214 80 Provisional filing fee | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| | 140 | 110 | 240 | 55 | Petition to revive – unavoidable | |
| SUBTOTAL (1) (\$) | 141 | 1,280 | 241 | 640 | Petition to revive – unintentional | |
| 2. EXTRA CLAIM FEES | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | |
| Fee from Ext <u>ra Claims Below</u> Fee Paid | 143 | 460 | 243 | 230 | Design issue fee | |
| Total Claims 38 -36**= 2 × 18 = 36 | 144 | 620 | 244 | 310 | Plant issue fee | |
| Independent 10 - 8**= 2 × 84 = 168 | 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| Multiple Dependent | 123 | 50 | 123 | 50 | Petitions related to provisional applications | |
| **or number previously paid, if greater; For Reissues, see below | 126 | 180 | 126 | 180 | Submission of information Disclosure Stmt | |
| Large Entity Small Entity Fee Fee Fee Fee Description Code (\$) Code (\$) | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 103 18 203 9 Claims in excess of 20 | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 102 84 202 42 Independent claims in excess of 3 | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 104 280 204 140 Multiple dependent claim, if not paid | i | | | | • | |
| 109 84 209 42 **Reissue independent claims over original patent | Other fe | ee (spec | :ify) | | | |
| 110 18 210 9 **Reissue claims in excess of 20 and over original patent | Other fee (specify) | | | | | |
| SUBTOTAL (2) (\$) 204 | *Reduc | ed by Ba | asic Filin | ng Fee P | Paid SUBTOTAL (3) (\$) 400 |) |

| SUBMITTED BY | | | | Complete (if a | pplicable) |
|-------------------|---------------|--------------------------------------|--------|----------------|----------------|
| Name (Print/Type) | DAVID G. POSZ | Registration No. (Attorney/Agent) | 37,701 | Telephone | (202) 416-1638 |
| Signature | TOUR | | | Date | Dec. 24, 200 |

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| This Form | Based on | PTO/SB/2 |
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| RANSMITTAL | |
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| FORM | |

(to be used for all correspondence after initial filing)

| Application Number | 09/551,809 | |
|------------------------|----------------|--------------|
| Filing Date | April 18, 2000 | |
| First Named Inventor | FURUIKE et al. | |
| Group Art Unit | LY, ANH | |
| Examiner Name | 2172 | RECEIVE |
| Attorney Docket Number | 1-31 | DEC 9 0 2040 |

| ENCLOSURES (check all that apply) Technology Contest at | | | | | | |
|--|---|--------------------------------|---|-------------|---|--|
| X Fee Transmit | tal Form | Assign (for an | ment Papers Application) | | After Allowance Communication to Group | |
| Fee Af | tached | Drawin | ıg(s) | | Appeal Communication to Board of Appeals and Interferences | |
| X Amendment | Response | Licens | ing-related Papers | | Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) | |
| After F | inal | Petition (PTO/S Petition | n Routing Slip SB/69) and Accompanying n | | Proprietary Information | |
| Affida | vits/declaration(s) | | onal Application | | Status Letter | |
| X Extension of | Time Request | Power Change Address | of Attorney, Revocation e of Correspondence s | \boxtimes | Additional Enclosure(s) (please identify below): | |
| Express Abai Request | ndonment | Termir | nal Disclaimer | | APPENDIX SHOWING CHANGES TO CLAIMS | |
| Information D Statement | isclosure | Small Entity Statement | | | | |
| Certified Copy Document(s) | y of Priority | Request of Refund | | | | |
| Response to Incomplete A | Response to Missing Parts/ Incomplete Application Remarks | | | | | |
| Response to Missing Parts under 37 CFR 1.52 or 1.53 | | | | | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | | | | |
| Firm or Individual name | | | | | | |
| Signature CON | | | | | | |
| Date December 24, 2002 | | | | | | |
| OIPE CERTIFICATE OF HAND DELIVERY | | | | | | |

I hereby certify that this correspondence is being hand delivered to and deposited with the USPTO at the Customer Service Window, Office of Initial Patent Examination, Crystal Plaza Building 2, Room 1B03, 2011 South Clark Place, Arlington, VA 22202 on the below-indicated date and is addressed to: Assistant Commissioner for Patents, Washington, DC 20231.

| Type or printed name | David G. Posz | | |
|----------------------|---------------|------|-------------------|
| Signature | BUB | Date | December 24, 2002 |